PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

2183-520845

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			.39				ſ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			39 minus 20=		* 19			X\$ 9=	171	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =					X42=		OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in column 2		L	TOTAL	54	OR	TOTAL	
CLAIMS AS AMENDED - P					PART II						OTHER THAN OR SMALL ENTITY	
		(Column 1)		(Colu		(Column 3)		SMALL E		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F.CL AIM	=	$\lfloor \lfloor$	X42=		OR	X84=	
	PIRST PRESE	NTATION OF INI	JETIPLE DEP	DEPENDENT CLAIM			, [+140=		OR	+280=	
							L	TOTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)		DDIT. FEE			ADDN. FEE	
		CLAIMS		HIGH		Column	1 г		ADDI-	1		ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	T CL AIM	=	4 [X42=		OR	X84=	
	FINST PRESE	NIAHON OF W	JETIFEE DEF	LINDLIN	CEANIN		┛┃	+140=		OR	+280=	
						•	L A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)			mn 2)	(Column 3)	_					0
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=] [X\$ 9=	•	OR	X\$18=	
	Independent	*	Minus	***	T CL AIN	=	4 [X42=		OR	X84=	
	FINST PHESE	ENTATION OF M	OLTIPLE DE	PENDEN	I CLAIM		┛╽	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
	The "Highest Nur	nber Previously Pa	id For" (Total c	r Independ	dent) is th	e highest numb	er fou	ind in the app	propriate bo	x in co	lumn 1.	